DECLARATI		Attorney Docket Number	21419Y	
POWER OF AT FOR UTILITY O		First Named Inventor	Colandrea, Vincent J., et al	
PATENT APPL	LICATION	CC	OMPLETE IF KNOWN	
(37 CFR 1.		Application Number		
Declaration Submitted	Declaration Submitted after Initial	Filing Date		
with Initial OR Filing	Filing (surcharge (37 CFR 1.16 (e)) required)	Group Art Unit		
	roquires,	Examiner Name		
As a below named inventor	r, I hereby declare that	t:		
My residence, mailing addre	ess, and citizenship are a	as stated below next to my name	3.	
) or an original, first and joint invenent is sought on the invention entitle	
(3,4-DISUBSTITUTED)PRO	PANOIC CARBOXYL	ATES AS SIP (EDG) RECEPT	FOR AGONISTS	
the specification of which		(Title of the Invention)		
	ket Number and Title of	f the Invention noted above		
OR is attached hereto				
OR was filed on (MM/DD/	/YYYY)	as United States Apr	plication Number or PCT Internatio	onal
Application Number		vas amended on (MM/DD/YYY	·	plicable).
amended by any amendment			ied specification, including the clair	ms, as
as defined in 37 CFR 1.56, in	ncluding for continuation	on-in-part applications, material	ion known to me to be material to pa information which became availab ate of the continuation-in-part appli	ole between
			of any foreign application(s) for pate	
certificate(s), or 365(a) of any	v PCT international appl	lication which designated at lea	st one country other than the United	d States of
America, listed below and have	ve also identified below,	, by checking the box, any forei	ign application for patent or invento	or's certificate(s),
or of any PCT international ar	pplication having a filing	g date before that of the applica	ation on which priority is claimed.	
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Attorney Docket Number	Priority Claimed? YES NO
Additional foreign applica	ation numbers are listed on	a supplemental priority data sheet I	PTO/SB/02B attached hereto.	
I hereby claim the benefit under	35 U.S.C. 119(e) of any U	Inited States provisional application	n(s) listed below.	
Application Num	ıber(s)	Filing Date (MM/DD/YYYY)	Attorney Docket N	Number
60/530,186	12/	/17/2003	21419PV	

DECLARATION AND POWER OF ATTORNEY for Utility or Design Patent Application

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City	Rahway				Sta	ate	NJ		ZIP		07065-0	0907	
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Additional	l inventors are being	, named on the	esup	plemental A	Additio	onal Inv	ventors(s`) sheet(s) PTO/SB	/02A a	ttached h	nereto.	

			 												
		oint Inventor, if any:					A petition has been filed for this unsigned inventor								
Give	n N	ame (first and middle [if any])			Family Name or Surname								
George A.	,		·			D	Doherty								
Inventor's Signature							Date								
Residence: City	Sup	erior	State	CC)		Country USA Citizenship US								
Mailing Address		Merck & Co., Inc. P.O.	Box 20	00											,
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Name of Additional Joint Inventor, if any:							A petition has been filed for this unsigned inventor								
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Residence: City	Mill	burn	State	NJ			Counti	y 07	7041	Citizenship US					
Mailing Address		Merck & Co., Inc. P.O. I	3ox 200	00									•		
City		Rahway				Stat	e NJ		ZIP 0	7065-09	07	Count	ry	U.S.A.	
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Leslie						Toth		_							
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	required)	Examiner Name		
As a below named inventor	r, I hereby declare that	i :		
My residence, mailing addre	ess, and citizenship are a	as stated below next to my name	e.	
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OR is attached hereto				
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as defined in 37 CFR 1.56, in	ncluding for continuation	on-in-part applications, material	ion known to me to be material to pall information which became availablate of the continuation-in-part appli	le between
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Prior Foreign Application	phicadon naving a ming	Foreign Filing Date		Priority Claimed?
Number(s)	Country	(MM/DD/YYYY)	Attorney Docket Number	YES NO
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DECLARATION AND POWER OF ATTORNEY for Utility or Design Patent Application

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Residence: City	North	h Brunswick		State	. UJ		Cou	ntry US	SA		Citiz	enship	us	
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Additional	inventor:	s are being na	amed on the	sup	plemental A	Additio	onal In	ventors(s)) sheet((s) PTO/SB	/02A at	tached h	ereto.	

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		Joint Inventor, if any:					A petition has been filed for this unsigned inventor								
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Name of Addition	nal J	oint Inventor, if any:					A pe	tition	has be	en filed	for this	unsign	ed in	ventor	
Given Name (first and middle [if any])						Family Name or Surname									
effrey J.						Н	ale								
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Leslie						Toth									
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